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APPLICANTS

Zurab Khasidashvili, Rishon Le Zion, ISRAEL;

John Moondanos, San Francisco, CA;
Ziyad Hanna, Haifa, ISRAEL;

** CONTINUING DATA *****

None *PD*

** FOREIGN APPLICATIONS *****

None *PD*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>	ISRAEL	3	24	5

ADDRESS

34610
FLESHNER & KIM, LLP
P.O. BOX 221200
CHANTILLY, VA
20153

TITLE

Application of the retimed normal form to the formal equivalence verification of abstract RTL descriptions for pipelined designs

FILING FEE RECEIVED 1144	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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